PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number	Αp	plication	or	Docket	Numbe
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09895433

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY		
TOTAL CLAIMS 20		·				ſ	RATE FEE]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			29 minus 20=		.9			X\$ 9=		OR	X\$18=	162
INE	EPENDENT CL	4 mi	ninus 3 =			•	X40=			X80=	400	
MULTIPLE DEPENDENT CLAIM PRESENT						•			OR		-	
* If the difference in column 1 is less than zero, enter "0" in column 2							+135=		OR	+270=		
·							TOTAL		OR	TOTAL	12/2	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						_	SMALL	ENTITY	OR	OTHER SMALL I		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X40=		OR	X80=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT	CLAIM			+135=		OR	+270=	
							L	TOTAL			TOTAL	
		(Column 1)		(Colur	mn 2)	(Column 3)	Α	DDIT. FEE		JOH.	ADDIT. FEE	
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
L	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM		┞	.105			.070	
		٠					L	+135= TOTAL		OR	+270= TOTAL	
		(O-1 4)		(0 .1	•	(0.1	Α	DDIT. FEE		OR	ADDIT. FEE	
	e nakaja je je	(Column 1) CLAIMS	343443C	(Colur HIGH	EST	(Column 3)	lr	T	ADDI-			ADDI
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF MI	ULTIPLE DEF	ENDENT	CLAIM		╵├	.125				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Particular Poid Fed" IN THIS CONSTITUTE OF A PARTICULAR TOTAL TOTAL TOTAL TOTAL TOTAL												
***	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											